

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		03/10/00
O.I.P.E. CLASSIFIER		48	3/16/00
FORMALITY REVIEW		10-AM	4-7-00
RESPONSE FORMALITY REVIEW		2-AM	6-21-00

INDEX OF CLAIMS

☒ Rejected N
☒ Allowed I
☒ Canceled A
☒ Resubmitted O

Non-elected
 Interference
 Appeal
 Objected

BEST AVAILABLE COPY

Claim	Date
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If more than 150 claims or 10 actions - staple additional sheet here

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